

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

SECRET: Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type  
over the lines.

Childers for Senate, Inc.

ADDRESS (number and street) PO Box 246

☐ Check if different  
than previously  
reported. (ACC)

Booneville

CITY

MS

STATE

38829

ZIP CODE

2. FEC IDENTIFICATION NUMBER

3. IS THIS  
REPORT☒ NEW  
(N)

OR

☐ AMENDED  
(A)

STATE

DISTRICT

MS

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)  
☐ July 15 Quarterly Report (Q2)  
☐ October 15 Quarterly Report (Q3)  
☐ January 31 Year-End Report (YE)

(b) 12-Day PRE-Election Report for the:

- ☐ Primary (12P) ☒ General (12G) ☐ Runoff (12R)  
☐ Convention (12C) ☐ Special (12S)

Election on 11/04/2014

in the  
State of MS

(c) 30-Day POST-Election Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on in the  
State of☐ Termination Report (TER)

5. Covering Period

10/01/2014

through

10/15/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Marilyn Jones

Signature of Treasurer



Date

10-23-2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the Penalties of 2 U.S.C. 437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)